UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND							
1 Date of Request: 7-/2-05 2 Serial/Patent # 10/520083							
3 Please refund the following fee(s):		4 PAI NUI	PER IBER		DATE FILED	6 AMOUNT	
	Filing					\$ 100	
	Amendment					\$	
	Extension of Time					\$	
	Notice of Appeal/Appeal					\$	
	Petition					\$	
	Issue					\$	
	Cert of Correction/Terminal Disc.					\$	
	Maintenance					\$	
	Assignment					\$	
	0ther					\$	
		7 TOTAL AMOUNT OF REFUND			\$ 100		
		8 TO BE REFUNDED BY:					
10 REASON:		Treasury Check					
V	Overpayment		_	Cred	lit Dep	osit A/C #:	
	Duplicate Payment		,				
	No Fee Due (Explanation):	<u> </u>					
Credit Card Letund							
11 REFUND REQUESTED BY:							
SIGNATURE: John Anders TITLE: Paralesal Specialist PHONE: 308-9140 out 211							
SIGNATURE: The Undin				PHO	NE: <u>308</u>	-9140 out 211	
OFFICE: / PCT - DV/EO							
THIS SPACE RESERVED FOR FINANCE USE ONLY:							
APPI	APPROVED: DATE:						
L							

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B